2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 372588

Name:

Address:

City-St-Zip:

Entity Name: FEDERAL TITLE INSURANCE AGENCY, INC.

FILED Feb 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1193 S. U.S. HIGHWAY NO. 1 ROCKLEDGE, FL 32955 **Current Mailing Address: New Mailing Address:** 1193 S. U.S. HIGHWAY NO. 1 ROCKLEDGE, FL 32955 FEI Number: 59-1309658 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VAN NEST, BRENDA G 1193 S. U.S. HIGHWAY NO. 1 ROCKLEDGE, FL 32955 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition GALLAGHER, CAROLYN C Name: Name: 1193 S. U.S. HIGHWAY NO. 1 Address: Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: () Delete Title: Title: () Change () Addition VAN NEST, BRENDA G Name: Name: 1193 S. U.S. HIGHWAY NO. 1 Address: Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: () Delete Title: Title: () Change () Addition VAN NEST, DAVID C JR. Name: Name: 1193 SOUTH U.S. HIGHWAY #1 Address: Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: Title: () Delete Title: AVP () Change (X) Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

VAN NEST, DAVID C III

1193 SOUTH U. S. HIGHWAY 1

ROCKELDGE, FL 32955 US

SIGNATURE: DAVID C. VAN NEST, III AVP 02/21/2009